

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for Service of Process by U.S. Marshal

PLAINTIFF

United States of America

COURT CASE NUMBER

4:21-cv-01924

DEFENDANT

ROGER A. STROUD Solely in His Capacity as Heir of Sandra K. Mack a/k/a Sandra Kay Mack,

TYPE OF PROCESS
POSTINGSERVE
ATNAME OF INDIVIDUAL, COMPANY, CORPORATION ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
ROGER A. STROUD Solely in His Capacity as Heir of Sandra K. Mack a/k/a Sandra Kay Mack, Deceased
ADDRESS (Street or RFD, Apartment No., City, State and ZIP code)
2289 Pennsylvania Avenue f/k/a 339 Pennsylvania Avenue South Waverly, PA 18840

SEND NOTICE OF SERVICE COPY OF REQUESTER AT NAME AND ADDRESS BELOW

KML Law Group, P.C.
701 Market St.
Suite 5000
Philadelphia, PA 19106

Number of process to be served with this Form 285

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers and Estimated Times Available for Service)

Please post premises by 3/15/2023.

Signature of Attorney other Originator requesting service behalf of: PLAINTIFF DEFENDANT TELEPHONE NUMBER 215-627-1322 DATE 2/3/23

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated.

(Sign only for USM 285 if more than one USM 285 is submitted)

Total Process

District of Origin

District to Serve

Signature of Authorized USMS Deputy or Clerk

Date

1

No. 67

No. 67

2/6/23

I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

 A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date 02/09/2023 Time 1540 am pm
Signature of U.S. Marshal or Deputy

Service Fee \$195.00

Total Mileage Charges including endorsements \$78.60

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or (Amount of Refund)

\$0.00

REMARKS

NOTICE WAS POSTED.

PRINT & COPY

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

FILED
HARRISBURG, PA
PRIOR EDITIONS MAY BE USED

MAR 02 2023

Form USM-285
Rev. 12-80

PER

D.D.
DEPUTY CLERK